



**REQUEST FOR SPECIAL ADMINISTRATIVE PERMIT
(SAP)
ZERO LOT LINE SUBDIVISION
CITY OF ATLANTA, GEORGIA**

DATE RECEIVED _____

DATE FILED _____

APPLICATION NUMBER: _____

NAME OF APPLICANT _____

PHONE NUMBER: _____

EMAIL ADDRESS _____

CELL NUMBER: _____

NAME OF COMPANY _____

FAX NUMBER: _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

IF MORE THAN ONE OWNER, LIST ADDITIONAL OWNERS ON A SEPARATE SHEET

NAME OF OWNER _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

I HEREBY REQUEST approval of the subdivision of the subject property according to the plans, which are submitted as a part of the application. I HEREBY AUTHORIZE the staff of the City of Atlanta to inspect the premise of the above described property. I HEREBY SWEAR AND AFFIRM that all statements contained herein and attached hereto are true and correct to the best of my knowledge and belief.

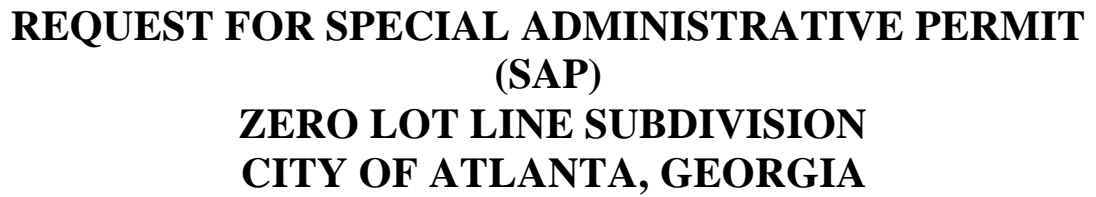
Owner or Agent for Owner (Applicant) _____

There is a thirty (30) day turnaround for each Zero Lot Line Special Administrative Permit (SAP) request.
A foundation and some framing of the buildings/units must exist before Zero Lot Line applications can only be accepted.

INSTRUCTIONS:

Submittals:

- A complete Zero Lot Line Application, including Project Description Summary and Authorization of Property Ownership Forms.
- One (1) copy of the master plan of the proposed development (if development is being built in phases).
- Four (4) copies of a clear and legible survey or plat at a size no larger than 17 x 22.
 - The survey or plat should show solid and dimensioned lot lines (bearings and lengths) for the boundaries of the overall parcel or for each footprint/lot to be considered for zero lot line approval. Boundary lines should be obtained from actual field-run survey records.
 - New street names must be approved by the Bureau of Planning prior to the submission of an application (where applicable).
 - All lots on new streets must reflect the addresses that have been approved by the Bureau of Buildings within the lot or the footprint of each proposed dwelling.
 - Surveys should reflect the name, size and extents of all bordering rights of way.
 - Surveyor must sign through seal.
 - The survey must be scalable. One actual inch must equal the distance referenced on the survey.
- Provide a copy of recorded covenants that address all ownership and maintenance concerns.
- Application fee of \$250.00 for a Zero Lot Line Special Administrative Permit in all SPI Zoning Districts. The application fee is \$100.00 for all other zoning districts. Checks must be payable to the City of Atlanta.
- A check in the sum of \$9.00 per different submitted page made out to Fulton County. Applicants for Zero Lot Line SAP requests in the City of Atlanta portion of Dekalb County are required to record the approved SAP in Dekalb County and return a copy to the Bureau of Planning for distribution and completion.



ADDRESS OF PROPERTY _____ _____ _____			
The subject property fronts _____ feet on the _____ side of _____, beginning _____ feet from the _____ corner of _____.			
Depth _____		Area _____	
Land Lot _____	District _____	Zoning _____	
Council District _____		Neighborhood Planning Unit (s) _____	
DESCRIBE PROPOSED SUBDIVISION (INCLUDE REFERENCE TO ANY RECENTLY APPROVED ZONING CASE			
Copy of the recorded covenants and agreements that addressed the ownership and maintenance of common areas attached.			
Q Yes		Q No	



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**AFFIDAVIT
AUTHORIZATION BY PROPERTY OWNER
APPLICATION FOR ZERO LOT LINE SUBDIVISION
CITY OF ATLANTA, GEORGIA**

I swear that I am the owner of _____
(Indicate addresses and/or parcel ID numbers of all properties involved in proposed replatting)

_____ which is the subject of the attached
application for zero lot line subdivision, and is shown in the records of _____ County, Georgia.

I authorize the person named below to act as my agent in the pursuit of this application for the subdivision of the
subject property.

NAME OF APPLICANT _____

ADDRESS OF APPLICANT _____

APPLICANT'S TELEPHONE NUMBER _____

APPLICANT'S EMAIL ADDRESS _____

NAME OF OWNER _____

SIGNATURE OF OWNER _____

Sworn to and subscribed before me this _____ day of
_____, 200_____

Notary Public